1381406



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB A	PPROVAL	
OMB Numbe		
Expires:		
Estimated av	rerage burden	
hours p		
S Prelix	0606187	2

Filing Under (Check box(es) that apply):	PROCESS
A. BASIC IDENTIFICATION DATA	Alou
1. Enter the information requested about the issuer	NUV 1 7 200
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) 1410 Abbot Kinney LLC	THOMSON
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1726 N. Vermont Avenue, Los Angeles, CA 90027	(323) 933-3735
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
1410 Abbot Kinney Blvd., Suite A, Venice, CA 90291 Brief Description of Business	
frozen yogurt retail store	•
Type of Business Organization corporation	case specify):limited liability company
Actual or Estimated Date of Incorporation or Organization: 07 05 Actual Estim Durisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	alod CA
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering.	•
and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	49.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously suppli- not be filed with the SEC.	
Filing Fee: There is no federal filing fee.	•
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sa ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Sc are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law. This notice and must be completed.	curities Administrator in each state where sales the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal ex- appropriate federal notice will not result in a loss of an available state exemption unles filing of a federal notice.	

				A. BASIC IDI	ENTI	FICATION DATA	,	· <u>- '</u> ;:	<u> </u>	and months a
2.	Enter the information r	equested for t	he followin	ig:						
	• Each promoter of	the issuer, if t	he issuer h	as been organized w	ithin	the past five years;		,		
	 Each beneficial ov 	ner having the	e power to	vote or dispose, or di	rect th	e vote or disposition	of, 10	% or more o	fa clas	s of equity securities of the issuer.
	 Each executive of 	ficer and direc	tor of corp	orate issuers and of	corpo	rate general and man	aging	partners of	partne	ership issuers; and
	 Each general and 	managing part	ner of part	nership issuers.						
Chec	k Box(cs) that Apply:	Promo	ter 📋	Beneficial Owner		Executive Officer		Director	Ø	General-end/or Manager Managing Penner
	Name (Last name first, NKIDS INC.	if individual)							·····	
	ess or Residence Address North Vermont Ave				ode)					· · · · · · · · · · · · · · · · · · ·
Chec	k Box(es) that Apply;	Promo	ter 🔽	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
	Name (Last name first. NKIDS HOLDING L									· · · · · · · · · · · · · · · · · · ·
	icss or Residence Addre North Vermont Ave	•			ode)					
Chec	k Box(es) that Apply:	Promo	ler 🛛	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
	Vame (Last name first, ami, Inc.	if individual)								
	ess or Residence Addre Wentworth Avenue				ode)			····		
Chec	Box(cs) that Apply:	Promo	(cr	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full N	lame (Last name first,	if individual)								
Busir	ess or Residence Addre	rss (Number	and Stree	l, City, State, Zip Co	ode)			· · · · · · · · · · · · · · · · · · ·		
Chec	Box(es) that Apply:	Promo	ler 🔲	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full 1	Name (Last name first,	(f individual)			•••					
Busir	ess or Residence Addre	ess (Number	and Stree	t, City, State, Zip Co	nde)					
Chec	R Box(es) that Apply:	Promo	ter 🗍	Beneficial Owner		Executive Officer		Director	0	General and/or Managing Partner
Full !	Same (Last name first,	if individual)				-, 				
Busir	iess or Residence Addre	ess (Number	and Stree	t, City, State, Zip Co	odc)					
Chec	k Box(es) that Apply:	Promo	ter 📗	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full t	Name (Last name first,	if individual)		· · · · · · · · · · · · · · · · · · ·						•
Busin	ness or Residence Addr	ess (Number	and Stree	t, City, State, Zip Co	ode)					······································

				. B. I	NFORMÁT	ION ABOU	t offeri	NG	7.3 .70		hip ye (
I. Has the	o jecuar cal	d, or does t	ha icenar i	ntend to se	ll to non-o	ooraditad i	invactore is	, this offer	ino?		Yes	No
(,)163 (1)	c rasuer son	u, or ancar			n, ta non-e n Appendix				=		. L .	Ki
2. What i	s the minin	num investo					_				. s	
								•			Yes	No
3. Does th	he offering	permit join	t ownersh	ip of a sing	le unit?	************			***************************************		. K	
commi If a per or state	ssion or sim son to be lis s, list the na	tion requestilar remund sted is an astame of the h , you may s	ration for s sociated pe troker or d	solicitation crson or age caler. If me	of purchas ent of a brol ore than fiv	ers in conn ker or deale c (5) perso	ection with ir registered ns to be list	sales of sed with the S ed are asso	curities in t SEC and/or	he offering with a stat	g. ic	
Full Name ((Last name	first, if ind	ividual)									
Business or	Residence					lip Code)				1		
Name of As	sociated B									** , *		
States in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Check	"All States	s" or check	individua	States)						,	. 🔲 AI	I States
AI. MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full Name (Last name	first, if ind	ividual)			· · · · · · · · · · · · · · · · · · ·						
Business of	r Residence	Address ()	Vumber an	d Street, C	ity, State,	Zip Code)	 					
Name of As	sociated Br	oker or De	alcr									
States in Wi	hich Person	Listed Hay	Solicited	or Intends	to Solicit	Purchasers	·					
		or check						,,	************		. Al	I States
[AL]	(AK)	[AZ]	ĀRĪ	CA	CO	CT	(DE)	(DC)	FL	(GA)	— []]]	ומו
11.	IN	11	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	(UN)	OH	OK)	OR	PΛ
सि	SC	SD	TN	TX	UT	VT	$[\overline{V}A]$	WA	WV	WI	WY	PR
Full Name (Last name	first, if ind	vidual)	•				_				
Business or	r Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)		•				
Name of As	sociated Br	oker or De	aler			·						
States in Wi	hich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check	"All States	or check	individual	States)							. 🔲 AI	l States
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	MN OK WI	MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

CFOFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROGEEDS (2.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount alread sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange an already exchanged.	k		
	Type of Security	Aggregate Offering Pric	e	Amount Already Sold
	Debt	\$ 0.00		\$ 0.00
	Equity	\$ 0.00		\$ 0.00
	Common Preferred	2.02		0.00
	Convertible Securities (including warrants)	\$ 0.00	_	\$
	Partnership Interests			\$ 0.00
	Other (Specify Membership Interests	. \$ 450,000.00	<u>,</u>	\$ 450,000.00
	Total	\$_450,000.00	 -	<u>\$ 450,000.00</u>
	Answer also in Appendix, Column 3, if filing under ULOE.	•		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in the offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of the purchases on the total lines. Enter "0" if answer is "none" or "zero."	10		Aggregate Dollar Amount
		Investors		of Purchases
	Accredited Investors	2		\$_450,000.00
	Non-accredited Investors			\$ 0.00
	Total (for filings under Rule 504 only)	2	_	\$_450,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities old by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1	he		-
		Type of		Dollar Amount
	Type of Offering	Security		Sold
	Rule 505		_	\$ 0.00
	Regulation A	membership		\$_0.00
	Rule 504	<u>interests</u>		\$ 450,000.00
•	Total	···		\$ 450,000.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of a securities in this offering. Exclude amounts relating solely to organization expenses of the insurupe information may be given as subject to future contingencies. If the amount of an expenditure not known, furnish an estimate and check the box to the left of the estimate.	er.		
	Transfer Agent's Fees	*************		\$_1,000.00
•	Printing and Engraving Costs		Z	\$ 1,000.00
	Legal Fees	• • • • • • • • • • • • • • • • • • • •	Z	S_10,000.00
	Accounting Fees		\square	\$ 5,000.00
	Engineering Fees		Ø	\$_0.00
	Sales Commissions (specify finders' fees separately)		abla	\$ 0.00
	Other Expenses (identify)		abla	\$_0.00
	· Total		\mathbb{Z}	s 17,000.00

	C. OFFERING PRIC	CE, NUMBER OF INVESTORS, EXPENSES	S AND USE OF PROCEEDS	<u> 1878 a de la co</u>
	b. Enter the difference between the aggregand total expenses furnished in response to I proceeds to the issuer."		e "adjusted gross	\$_433,000.00
i.	Indicate below the amount of the adjusted each of the purposes shown. If the amou check the box to the left of the estimate. The proceeds to the issuer set forth in response	int for any purpose is not known, furnish ne total of the payments listed must equal th	an estimate and	
. 19		•	Payments to Officers, Directors; & Affiliates	Payments to Others
	Salaries and fees		•	
4	Purchase of real estate			
	Purchase, rental or leasing and installatio			. <u>V</u>
	and equipment	on or machinery	¬ \$	50,000.00
	Construction or leasing of plant buildings	s and facilities		☑ \$ 200,000.00
	Acquisition of other businesses (including offering that may be used in exchange for issuer pursuant to a merger)	r the assets or securities of another		
	Repayment of indebtedness			
	Working capital			✓ \$ 153,000.00
	Other (specify):			 Ø \$_0.00
	<u> </u>		S	Z s 0.00
ij	Column Totals		∑ \$ 0.00	Z S 433,000.00
	Total Payments Listed (column totals add	fed)	<u>\$</u>	33,000.00
v	·:	D. FEDERAL SIGNATURE	APPENDING BEFARE	
ign	issuer has duly caused this notice to be sign lature constitutes an undertaking by the issue information furnished by the issuer to any	ed by the undersigned duly authorized pers ner to furnish to the U.S. Securities and Ex	son. If this notice is filed under Ruschange Commission, upon writte	ale 505, the following
ssu	er (Print or Type)	Signature	Date	
141	ID Abbot Kinney LLC	1	1/0-2	7. 2 6
lan	ne of Signer (Print or Type)	Title et Signer (Print or Type)	4SUNKIDS INC., Manager	·
· a :				

ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)